

MO6000001061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

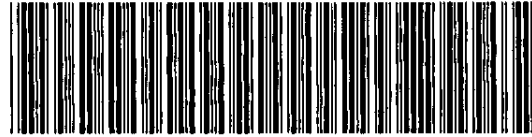
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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07/01/13--01047--007 **25.00

FILED
13 JUL - 1 AM 11:09
TALLAHASSEE, FLORIDA

JUL 05 2013
D. BUTLER



FIRST LIBERTY FINANCIAL

MORTGAGE

FILED
13 JUL -1 AM 11:09
CLARK COUNTY, FLORIDA

June 24, 2013

Re: Principal Office Address Change

To Whom It May Concern:

Please be advised First Liberty Financial Group, LLC is changing the principal office address as follows:

NEW ADDRESS:

9520 Ormsby Station Road, Suite 20
Louisville, KY 40223

MAILING ADDRESS:

3000 Alvey Park Drive W, Suite 9
Owensboro, KY 42303

Please see the attached filing for recording regarding same. Please feel free to contact me with any questions by email or phone. Thank you in advance for your assistance.

Best regards,
Amanda Clark
Compliance Officer
Amanda.clark@firstliberty.net



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: First Liberty Financial Group, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amanda Clark

Name of Person

First Liberty Financial Mortgage

Firm/Company

3000 Alvey Park Dr W, Suite 9

Address

Owensboro, KY 42303

City/State and Zip Code

amanda.clark@firstliberty.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amanda Clark

Name of Person

at (270) 713-5301

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
13 JUL -1 AM 11:09
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: First Liberty Financial Group, LLC
2. Jurisdiction of its organization: KY
3. Date authorized to do business in Florida: 02/22/2006

SECTION II (4-7 complete only the applicable changes)

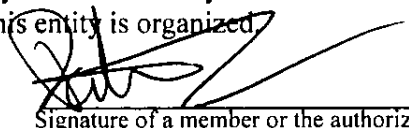
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? _____
5. New name of the limited liability company: _____
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration: _____
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: NEW PRINCIPAL OFFICE WHEREVER LOCATED: 9520 Ormsby Station Rd., Suite 20, Louisville, KY 40223

PRINCIPAL OFFICE ADDRESS CHANGE

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized



Signature of a member or the authorized representative of a member

Patrick Cason

Typed or printed name of signee

Filing Fee: \$25.00